



**CONTRACT AWARD SHEET  
DEPARTMENT OF PROCUREMENT MANAGEMENT**

Bid No. **IB8139-3/11-3**  
Award Sheet

**PURCHASING** DIVISION

BID NO.: **IB8139-3/11-3**

PREVIOUS BID NO.:

TITLE: **PELICAN EQUIPMENT CASE W/LIDS INSERT**

CURRENT CONTRACT PERIOD: **01/01/2011** through **12/31/2011**

Total # of OTRs: **3**

**MODIFICATION HISTORY**

Bid No. **IB8139-3/11-3**

Award Sheet

**DPM Notes**

**APPLICABLE ORDINANCES**

LIVING WAGE: **No**

UAP: **Yes**

IG: **Yes**

OTHER APPLICABLE ORDINANCES:

**CONTRACT AWARD INFORMATION:**

**Yes** Local Preference

**Yes** Micro Enterprise

**No** Full Federal Funding

**No** Performance Bond

**No** Small Business Enterprise (SBE)

**No** PTP Funds

**No** Partial Federal Funding

**No** Insurance

Miscellaneous:

REQUISITION NO.:

PROCUREMENT AGENT:

**LAUREANO, RUTH**

PHONE: 305 375-4725

FAX: 305 375-4407

EMAIL: [RUTHL@MIAMIDADE.GOV](mailto:RUTHL@MIAMIDADE.GOV)

DEPARTMENT OF PROCUREMENT MANAGEMENT  
PURCHASING DIVISION

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VENDOR NAME: **BOUND TREE MEDICAL LLC**  
 DBA:  
 FEIN: **311739487** SUFFIX : **01** 43016  
 STREET: **5200 RINGS ROAD SUITE A** CITY: **DUBLIN** ST: **OH** ZIP:  
 FOB\_TERMS: **DEST-P** DELIVERY: **AS REQUIRED**  
 PAYMENT TERMS: **NET30** TOLL PHONE: **800-533-0523**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor: **No**

|            |           |                  |           |                         |            |
|------------|-----------|------------------|-----------|-------------------------|------------|
| SBE        | <b>No</b> | Set Aside        | <b>No</b> | Bid Pref.               | <b>No</b>  |
| Micro Ent. | <b>No</b> | Selection Factor | <b>No</b> | Goal                    | <b>No</b>  |
| Other:     |           |                  |           | Vendor Record Verified? | <b>Yes</b> |

\*\*\*\*\*

**Vendor Contacts:**

| Name              | Phone1       | Phone2       | Fax          | Email Address         |
|-------------------|--------------|--------------|--------------|-----------------------|
| JENNIFER A BUTLER | 614-760-5032 | 800-533-0523 | 877-311-2437 | JBUTLER@BOUNDTREE.COM |

**ITEMS AWARDED Section:**

Details: **IB8139-3/11-3**

**SEE AWARD SHEET ATTACHMENT**

| <u>Item #</u> | <u>Description</u> | <u>Qty</u> | <u>Unit Price</u> |
|---------------|--------------------|------------|-------------------|
|---------------|--------------------|------------|-------------------|

**End of ITEMS AWARDED Section**

**AWARD INFORMATION Section**

BCC Award: **No** DPM Award: **No**  
 BCC Date: DPM Date: **09/02/2010**

Contract Amount: \$ **24,910.00**

Additional Items Allowed: **Yes**

Agenda Item No.:

Special Conditions:

**BPO INFORMATION Section:**

**BPO ID : ABCW1001219**

----- Commodities Info -----

----- Department Info -----

| <u>Code</u> | <u>Description</u>    | <u>Department Id</u> | <u>Dollar Allocations</u> |
|-------------|-----------------------|----------------------|---------------------------|
| 475-84      | TRAUMA PACKS AND KITS | FR*****              | \$14,358.50               |

End of BPO Information Section